

**Men's Perspectives and Use of Modern
Contraceptives within Marriage in Butagaya Sub
County, Jinja district, Uganda.**

By

Turinde, Kabali Asa

Main Supervisor

Dr. Joar Svanemyr

Co-Supervisor

Prof. Johanne Sundby

Local Supervisor

Mr. John Frank Mugisha

University of Oslo
Faculty of Medicine
Department of General Practice and Community Medicine
Section for International Health



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Acronyms

| | | |
|---------|---|--|
| AIDS | - | Acquired Immune Deficiency Syndrome |
| CPR | - | Contraceptive Prevalence Rate |
| DISH | - | Delivery of Improved Services for Health |
| Dr | - | Doctor |
| FGDs | - | Focus Group Discussions |
| FP | - | Family Planning |
| FPAU | - | Family Planning Association of Uganda |
| FY | - | Financial Year |
| GTZ | - | German Technical Organization for Development Co-operation |
| HC | - | Health Center |
| HIV | - | Human Immune - Deficiency Virus |
| IEC | - | Information Education and Communication |
| ICPD | - | International Conference on Population and Development |
| IPPF | - | International Planned Parenthood Federation |
| IUD | - | Intra Uterine Device |
| JHU/CCP | - | John Hopkins University / Center for Communication Programs |
| LCs | - | Local Councils |
| MCH/FP | - | Maternal Child Health / Family Planning |
| MISR | - | Makerere Institute of Social Research |
| MoH | - | Ministry of Health |
| NGOs | - | Non- Governmental Organizations |
| NORAD | - | Norwegian Agency for Development Cooperation |
| SPSS | - | Special Program for Social Scientists |
| STDs | - | Sexually Transmitted Diseases |
| STIs | - | Sexually Transmitted Infections |
| UBOS | - | Uganda Bureau of Statistics |
| UNAIDS | - | United Nations Joint Program on HIV/AIDS |
| UNCST | - | Uganda National Council for Science and Technology |
| UNDP | - | United Nations Development Program |
| UNFPA | - | United Nations Fund for Population Activities |
| UPE | - | Universal Primary Education |
| US \$ | - | United States Dollar |
| USAID | - | United States Agency for International Development |
| WHO | - | World Health Organization |

Dedication

To my parents, for all they sacrificed to give me education

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Executive Summary

Introduction: Despite the significant investments put into improving the provision of contraceptive services in Uganda, the desired outcomes have not been realized. Contraceptive prevalence rate remains low and only 18% of the currently married women are using a modern method. Total fertility rate is as high as 6.9 and there is a huge unmet need for contraceptive use among women estimated at 35% (UBOS & ORC Macro, 2001). One of the reasons often mentioned for these poor reproductive health outcomes is lack of male involvement and support for contraceptive use. The current study explored men's perspectives and use of modern contraceptives within marriage. The results of this study are anticipated to be a valuable input into interventions aimed at increased engagement of men in contraception and other reproductive health battles.

Methods: It was a cross sectional study carried out in one randomly selected rural sub-county (Butagaya) in Jinja district in eastern Uganda. A combination of qualitative as well as quantitative methods of data collection were utilized in a complementary manner and included: 7 focus group discussions, 8 in-depth interviews, 3 key informant interviews and structured interviews with a random sample of 140 married men. Besides married men, other study participants included married women and staff of health facilities offering contraceptives services within the sub county.

Key findings: Majority (80.7%) of men were not using contraceptives even when convenient services were purportedly freely available because a larger proportion (39.7%) of men was pro- children. In this society, children were highly valued for a variety of economic, social and cultural reasons. The pro-children notions were reinforced by high mortality rates among children due to inadequate health care system. Men perceived contraception as a means to deny them children, which threaten them with derision and ostracism amongst their male peers. The pro-children notions were very strong to overshadow any other view. For instance, whereas majority of men were aware of the risks women are exposed to as a result of repeated childbearing, they remained unbothered and continued to desire for more children.

However, the pro-children notions were being questioned in light of the growing poverty in many homes. Some men associated many children with problems and perceived contraception as a means to solve it although such opinions were held by a minority and were expressed in the context of considerable ambivalence. Program managers could take advantage of this optimism in order to invoke positive change. Men also expressed fears that contraception facilitates women to conceal their involvement in extra marital relationships. Even though, some men may allow their wives to use contraceptives, they remain suspicious and uncomfortable due to such a belief.

Whereas the negative side effects of modern contraception are a reality to women, men were more concerned about the inconvenience they create in terms of interrupting their daily sexual enjoyment than the health of the spouse. The issue of negative side effects raises a quality of care concern, hence suggesting that addressing contraceptive barriers at community level needs intervention at clinic level as well. In addition, given that majority of women use contraceptives secretly, it is important to note that a woman who hides the method she uses and experiences side effects with that method is at the risk of stopping the method rather than changing to another one that is likely to be detected by her husband.

This study has demonstrated that despite the changing attitudes among men and their endorsement of the shared responsibility between a man and woman in as far as reproductive and family responsibilities are concerned, it remains theoretical. Women do not enjoy any rights partly because they are not aware of them and men continue to dominate them. The secret use of contraceptives by women with its inherent problems is clear testimony of this.

Despite the high levels of awareness about contraceptive methods among men, they perceived contraception in terms of stopping childbearing completely or practicing it when the desired number of children has been attained. There were also beliefs such as; contraceptives can inflict harm, cause infertility and even death to those who use it. Condoms use (44.4%) though the commonly used method amongst men was associated with extra marital affairs for prevention of STDs particularly the deadly HIV/AIDS rather than as a method of contraception. It was perceived improper to use a condom with one's spouse.

Conclusion: The results of this study generally suggest that even if men had more or a variety of contraceptives beyond the condom, vasectomy and withdrawal, their acceptability to use those contraceptives would not be necessarily significantly better without changes at the society level.

Recommendation: A strong educational campaign at the grass root remains a key strategy. It should utilize the multi-media approach and focus more on behavior change among men. However, the success of this effort will require patience and resolve with a sense of strategic partnership with men and community local structures.